

Montana Public Service Commission Motor Carrier Annual Report

Report must be filed on or before March 31st each year

All annual report filings must be signed by an owner or officer of the company and notarized by a notary public. (oath page)

Carrier Name	Millennium Automa	tion USA INC.		
(EXACTLY AS SHOWN ON	DBA			
PSC	Glendive Cab / D	elivery Service		
AUTHORITY)				
;	0.510			
PSC Number	9518	See General Instruction # 5		
See Gen	eral Instruction # 1			
	2017	***************************************		
Reporting Year	24.7			
***************************************	mm/vvvv	to mm/yyyy format		
	od (if other than 0/ 2017	12 20/7		
calend	lar year) 01 / 2017	to 12 1 0017		
CARRIER	POBOX-453			
ADDRESS				
[City Glendive State	MT Zip 59330		
_	Check Is the address shown above the	carriers official address now on file at the PSC		
YES		ve monthly notice and other materials from the		
NO		PSC)?		
	Check If the answer to the above ques	tion is NO do you want your official address		
YES		to that shown above?		
МО				
Carrier e-mail	SINGHIH Q VAHOO. CON	optional		
address		***************************************		
r	Person Completing Report			
Name	HARMEET SINGH			
Phone Number	406-939-4494			
E-mail Address SINGHTH@YAHOO, COM optional				
E-man Address				
	Check One			
YES		PORT ANY REGULATED INTRASTATE		
NO If NO See Gene		D GOODS OR GARBAGE DURING		
instruction #:				
	Montana Public Servi	ce Commission		

Montana Public Service Commission Transportation Division 1701 Prospect Avenue / PO Box 202601 Helena, MT 59620-2601

PSC#	1 /				
Year	2017				
		SCHEDULE 1			
	T	INCOME STATEMENT			
	Operating	Sevenue	garana a sa		
1.		astate Revenue			
2.		rstate Revenue			
3.		-Regulated Revenue	16800.00		
4.	TOTAL RE		10000.00		
	TO THE AL				
	Expenses				
5.		ries—Officers & Supervisory Personnel			
		ries & Wages			
6.	Buile	Clerical & Administrative			
7.		Drivers & Helpers	3250.00		
8.		Cargo Handlers	.5250.00		
9.		Vehicle Repair & Service	795.00		
10.		Other Labor	100.00		
	Oth	er Fringes			
11.		Payroll Taxes	240.00		
12.	1	Workman's Compensation	2 70		
13.		Pension & Welfare Expenses			
***************************************	Ope	rating Supplies & Expenses			
14.	-	Fuel for Motor Vehicles	2200.00		
15.		Vehicle Parts			
16.		Other Operating Supplies & Expenses Printing	100.00		
17.		General Supplies & Expenses	70000		
	Ope	rating Taxes & Licenses			
18.		Gas, Fuel and Oil Taxes			
19.		Real Estate & Personal Property Taxes			
20.		Vehicle License & Registration Fees	339.00		
21.		Other Taxes	_		
22.	Insu	rance	3852.00		
23.	Con	munications & Utilities Phone	1200.00		
24.	Dep	reciation & Amortization			
25.		Revenue Equipment			
26.		Other			
	Purc	hased Transportation			
27.		With Driver			
28.		Without Driver	11800.00		
29.		Other Purchased Transportation			
30.		ding & Office Equipment Rents			
31.		or Loss on Disposition of Operating Assets			
32.	Miso	cellaneous Expenses			
33.	TOTAL EX	PENSES	23,876.60 - 7076.00		
34.	NET INCO	ME OR LOSS	- 7076.00		

PSC#	95	78		
Year	20			
***************************************			SCHEDULE 2	
			DATA ANGRESIA	
			BALANCE SHEET	
			(ASSETS)	
	CUDD	ENTE AC	OFTO .	
1	CURR	ENT AS	200000	
1.			Working Funds	3000.00
2. 3.		 	Deposits	
			rary Cash Investments	
4. 5.			Receivable	
***			ts Receivable	
6.		Prepayr		
7.			ls & Supplies	
8.		Other C	urrent Assets	
9.			TOTAL CURRENT ASSETS	3000.00
	TANG	IBLE PROPERTY		
10.		Carrier	Operating Property	·
11.			Less: Reserve for Depreciation	
12.	e morphologica	Carrier Operating Property Leased to Others –		٠
13.		Less: Reserve for Depreciation		
14.		Non-Ca	rrier Operating Property	1,45,000.00
15.		Less: Reserve for Depreciation		
16.			TOTAL TANGIBLE PROPERTY	1.45,000.00
***************************************	INTAN	GIBLE	PROPERTY	
17.		Organization, Franchises & Permits		
18.			Less: Reserve for Amortization	
19.		Other Intangible Property		
20.			Less: Reserve for Amortization	
21.			TOTAL INTANGIBLE PROPERTY	
22		m . I r		
22.		Total Investment Securities and Advances —		
23.	Total Special Funds Total Deferred Debits —			
24.		1 otal De	eterred Debits	******
25.	TOTAL	ASSET	rs -	

PSC#	058		
Year	2017	ACTION III	
		SCHEDULE 2	
		BALANCE SHEET	
		(LIABILITIES)	
	CURRENT LIAE	BILITIES	
26	Notes Paya	ble & Matured Long Term Obligations / Reat	700.00.
27	Accounts P	ayable / Chedit Card Paragen	2000.00.
28	Wages Paya	able /	
29	C.O.D.'s U		
30	Taxes Accr		
31	Interest Acc		
32	Matured Int		
33	Other Curre	ent Liabilities CAR Payment	270.00.
34		TOTAL CURRENT LIABILITIES	2970.00
•	LONG TERM DE	EBT DUE WITHIN ONE YEAR	
35		Obligations and other Debt	
	Equipment	Obligations and other Deat	· · · · · · · · · · · · · · · · · · ·
	LONG TERM DE	EBT DUE AFTER ONE YEAR	
36	Advances P		· · · · · · · · · · · · · · · · · · ·
37	Equipment		******
38		Less reacquired and nominally issued	
39		Other Long Term Obligations	
40		ess reacquired and nominally issued	
41		TOTAL LONG TERM DEBT	*
42	Total Defer		
43	Total Reserv	ves	***************************************
	SHAREHOLDER	S' (OR PROPRIETORS') EQUITY	
44.	Total Capita		
45		etors' Capital	•
46		ned Earnings	
47		TOTAL SHAREHOLDERS' (OR PROPRIETORS') EQUITY	
48	TOTAL LIABILITIES & SHAREHOLDERS' (OR PROPRIETORS') EQUITY		
	DO TOTAL ACCETE FOLIAL TOTAL LIADULTIES & CHARDING PROGRAM		
	DO TOTAL ASSETS EQUAL TOTAL LIABILITIES & SHAREHOLDERS' (OR		
	PROPRIETORS) EQUITY? IF NOT PLEASE REVIEW AND MAKE		
		CORRECTIONS	

PSC # <u>9578</u> Year <u>2017</u>	A TH			
STATE OF Montana				
County of <u>Dawson</u>	SS.			
I, the undersigned Millennian Automation USA we of the motor carrier, above named, on my oath say that the foregoing return has been prepared, under my direction, from the original books, papers and record of said motor carrier; that I have carefully examined the same and declare the same to be a complete and correct statement of the business and affairs of said motor carrier in respect to each and every matter and thing therein set forth, to the best of my knowledge, information and belief; and I further say that no deductions were made before stating the gross earnings or receipts herein set forth except those shown in the foregoing accounts; and that the accounts and figures contained in thee foregoing return embrace all of the financial operations of said motor carrier during the period for which said return is filed.				
	(Signature of owner/officer/authorized representative) OWNER (Title)			
(Title) SUBSCRIBED AND SWORN to before me this 12 to day of February, 20 18.				
(SEAL)	Musid Roens Notary Public			
DENISE L. ROEHL NOTARY PUBLIC for the State of Montana Residing at Glandive, Montana My Commission Expires August 01, 2021	In and for the State of Montana Residing at Alendire My Commission Expires August 01, 2021			